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PTO/SB/30*(10-01)

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REQUEST

FOR

CONTINUED EXAMINATION (RCE) TRANSMITTAL

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pliection of information unless it	displays a valid OMB control number.	11.
Application Number	09/478,467	#11
Filing Date	January 6, 2000	fd.
First Named Inventor	Matthew P. J. Bak	er
Art Unit	2682	*
Examiner Name	To, Doris Ha	
Attorney Docket Number	PHB 34,314 (7790	84)

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

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1. Submission required under 37 CFR 1.114	RECEIVED		
a. Previously submitted i. Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on			
(Any unentered amendment(s) referred to above will be entered).	eply Brief previously filed on <u>Technology Center 260</u> 0		
iii. Other	 · .		
b. X Enclosed			
i. X Amendment/Reply iii. L ii. Affidavit(s)/Declaration(s) iv.	Information Disclosure Statement (IDS) Other		
2. Miscellaneous			
Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)			
b. Other	t exceed 3 months; Fee under 37 CFR 1.17(i) required)		
			
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the	the RCE is filed.		
a. X The Director is hereby authorized to charge the follow Deposit Account No. 50-1713	ving fees, or credit any overpayments, to		
i. X RCE fee required under 37 CFR 1.17(e)			
ii. X Extension of time fee (37 CFR 1.136 and 1.17)	01/16/2003 CNGUYEN 00000005 501713 09478467		
iii. U Other	01 FC∗1801750.00 CH		
b. Check in the amount of \$ enclosed			
c. Payment by credit card (Form PTO-2038 enclosed)			
WARNING: Information on this form may become be included on this form. Provide credit card info			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
Name (Print Type) Frank C. Nicholas	Registration No. (Attorney/Agent) 33,983		
Signature Pract C. Phublis	Date 01/10/03		
CERTIFICATE OF MAILING O	OR TRANSMISSION		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as frst class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.			
Name (PrintlType) Frank C. Nicholas			
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Burden Hour Statement: This form is estimated to Take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.